

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000053596

FILED
Apr 27, 2004
Secretary of State

Entity Name: CYBER STRATEGIES, INC.

Current Principal Place of Business:

2155 OLD MOULTRIE RD
STE 201
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

Current Mailing Address:

2155 OLD MOULTRIE RD
STE 201
ST. AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 56-2087438

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONEY, BRIAN
2155 OLD MOULTIRE RD
STE 201
SAINT AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

MONEY, BRIAN CEO
2155 OLD MOULTIRE RD
STE 201
SAINT AUGUSTINE, FL 32086 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: BRIAN MONEY

04/27/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONEY, BRIAN
Address: 3645 CRAZY HORSE TRAIL
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: SD () Delete
Name: PAVELLE, SUZANNA
Address: 3645 CRAZY HORSE TRAIL
City-St-Zip: ST. AUGUSTINE, FL 32086

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: PAVELLE, MATTHEW
Address: 15103 HARBOUR VISTA CIRCLE
City-St-Zip: SAINT AUGUSTINE, FL 32080

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN MONEY

PD

04/27/2004

Electronic Signature of Signing Officer or Director

Date